TA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TM, SUITE 1A DES MOINES 14

www.iowa.gov/ethics



2009 DEC 29 PH 12: 25 lowa Code section 8,7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

1	or office us	aniy	
Indexed		<u> </u>	
Audited _	<u> Eax</u>	12.29	o 9
			'
Compute			

State Training School	
Name of Department or Office 3211 Edgington Avs.	Eidors, IA, 50627
Mailing Address	City, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR C	OFFICE:
Millie Dagit	
Name 32(1) Edgington Ave.	Eldora, l.A., 50627
Mailing Address (if different from above)	City, State, Zip (if different from above)
mdagir@dhs.state.ia.us Email Address	Area Code & Telephone Number (if different from above)
■ Irdu MAN 629	State Adde or combined to be compared to be control to be
ONOR OF GIFT, BEQUEST, OR GRANT:	
American Legion	
Name	
604 Front St Fairbank, Ia 50629	
Mailing Address City, State, Zip Code	— 12/21/09
	Date of Gift, Bequest, or Grant Amount/Value*
Area Code & Telephone Number	"value is defined as "fair market value" of item as determined by
	receiving department or office. If no value mark "0.00".
Email Address (optional)	
Provide a description of the gift, bequest, or grant and purpose there	reof
•	1001.
X-mas fund for students	
Criteria to use this form:	
Receipt of any gift bequest or grant that is received by any depart	tment of the state or received by the Governor on behalf of the state.
	,
atement of Affirmation:	
	eported above is accurate. I further affirm that the information concerning the
nor and assessment of the fair market value (if applicable) is correc	and true to the best of my knowledge.
Signature 7	December 29, 2009

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12TH, SUITE 1A
DES MOINTE

Fax: (515)281-3701 www.iowa.gov/ethics



2009 DEC 29 PH 12: 25 lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

use only
12.29-0
•

Signature		Date
Marin	4	December 29, 2009
tement of Affirmation: Millie Dagitaffior and assessment of the fair materials.	m that the gift, bequest, or grant reparts the correct a	orted above is accurate. I further affirm that the information concerning the and true to the best of my knowledge.
Oriteria to use this form: Receipt of any gift, bequest, or g	rant that is received by any departme	ent of the state or received by the Governor on behalf of the state.
Provide a description of the gift, X-mas fund for student	bequest, or grant and purpose thereo	of.
mail Address (optional)		
rea Code & Telephone Number		"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
ailing Address	City, State, Zip Code	12/21/09 \$ 50.00 Date of Gift, Bequest, or Grant Amount/Value*
ame	Dows, Ia 50071	
American Legion		_
NOR OF GIFT, BEQUEST,	OR GRANT:	Annual Control of the
mail Address		Area Code & Telephone Number (if different from above)
lailing Address (if different from magait@dhs.statc.iz.us	above)	City, State, Zip (if different from above)
arne 1211 Edgington Ave.		Eidors, 1A. 50627
Millie Dagit		
NTACT PERSON FOR REC	CIPIENT DEPARTMENT OR OF	FICE:
rea Code & Telephone No.		
ailing Address		City, State, Zip Code
ame of Department or Office 3211 Edgington Ave.		Eldors, 1A, 50627

Revised 06/05

IA ETHICS AND CAMPAIGN DISCLOSURE (

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A Gift, Bequest, or Grant information received by a department or received by a department or behalf

Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

accepted by the Governor on behalf of the state

Indexed	For office	ușe only
		12-8-09
Checked	•	
Compute	r	

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

State Training School	
Name of Department or Office 32(1) Edgington Ave.	Eldom, 1A, 50627
Aniling Address	City, State, Zip Code
rea Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT	DR OFFICE:
Millie Dagit	
larne 3211 56gi=gon AVc.	Fiden 11 cocca
Address (if different from above)	Eldors. LA. 50627 City, State, Zip (if different from above)
mail Address	Area Code & Telephone Number (If different from above)
ONOR OF GIFT, BEQUEST, OR GRANT:	
	·
St John's United Methodist Church	
PO Box 376 Radcliffe, Ia 502	30
failing Address City, State, Zip Code	11-8.09 \$ 25 2
rea Code & Telephone Number	
·	"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
mail Address (optional)	- The state of the
Provide a description of the gift, bequest, or grant and purpose	thereof:
Christmas	
Criteria to use this form:	
Receipt of any nift, here get or grant that is received by any de-	epartment of the state or received by the Governor on behalf of the state.
receipt or any girt, seedeest, or grant that is received by any de	eparament of the state of received by the Governor on beneal of the state.
stement of Affirmation:	
Millie Degit	
affirm that the gift, bequest, or gra or and assessment of the fair market value (if applicable) is or	ant reported above is accurate. I further affirm that the information concerning the
or sing december of the fell france raide (if approache) to be	and also to the seat of thy knowledge.
Amo to	December 8, 2009

IA ETHICS AND Jampaigh disclosur<mark>e si</mark>

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A 2009 DEC 30 DES MOINES, IA 50319

DES MOINES, IA 50319 Fax: (515)281-3701 www.iowa.gov/ethics 2009 DEC 30 AM 10: Bequest, or Grant information



Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

FORM-GBG

	For office use only
Indexed	
Audited	
Checked	
Compute	er

lowa Code section 8,7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filled within 20 days of receipt of the gift, bequest, or grant.

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

State Training School			
Name of Department or Office 3211 Edgington Avc.	Eldom, IA, 50627		
Mailing Address	City, State, Zip Code		
Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFF	ice:		
Millie Dagit			
Name 3211 Edgington Ave,	Eldors. IA. 50627		
Mailing Address (if different from above) mdagin@ds.statc.ia.ua	City, State, Zip (if different from above)		
Email Address	Area Code & Telephone Number (if different from above)		
OONOR OF GIFT, BEQUEST, OR GRANT:			
and the second s			
Grundy Co REC			
102 E G Avenue Eldora, Iowa 50627			
Mailing Address City, State, Zip Code	* 20.00 \$ 20.00		
maining radios			
Area Code & Telephone Number	Date of Gift, Bequest, or Grant Amount/Value*		
	"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".		
Email Address (optional)	- receiving department of onice. If no value mark 0.00.		
Provide a description of the gift, bequest, or grant and purpose thereof	t.		
REC donated 2 used telphone poles @ \$10.00 each	plus labor		
	F		
Criteria to use this form:			
Receipt of any gift, bequest, or grant that is received by any department	nt of the state or received by the Governor on behalf of the state,		
tatement of Affirmation:			
Millie Dagitaffirm that the gift, bequest, or grant repo	rted above is accurate. I further affirm that the information concerning the		
onor and assessment of the fair market value (if applicable) is correct ar			
	•		
	5		
De	<u>9-13-09</u>		

IN ETHICS AND REEL OF OSURE EL

2009 DEC 30 IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TM, SUITE 1A DES MOINES, IA 50319

www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lows or received by the Governor on behalf of the state be reported to the lows Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

indexed	For office use only
Audited .	
Checked	
Compute	х

Name of Department or Office 3211 Bagings Ave. Mailing Address City, State, Zip Code Area Code & Telephone No. ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Millic Degit Millic Address City, State, Zip Code Eldona, IA, 50627 Eldona, IA, 50627 City, State, Zip (If different from above) Malling Address (if different from above) Malling Address Area Code & Telephone Number (if different from above) ONORO OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Mailing Address Otty, State, Zip Code 641-858-5098 Area Code & Telephone Number **Value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00". **Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: **Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. **Internation:** Millic Dagit **Affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the oner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge. **Provide and the concerning the oner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	State Training School		
Mailing Address Area Code & Telephone No. Christian Address of different from above) Millie Dagit Area Code & Telephone Number Eldora, Lowa 50627 Millie Dagit Millie Dagit Millie Dagit Affirm that the gift, bequest, or grant and purpose thereof: Millie Dagit Affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the chors and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.		Eldom IA 50627	
Area Code & Telephone No. ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Millic Degit Name 2011 Edgeger Ave. Malling Address (if different from above) Area Code & Telephone Number (if different from above) CNOR OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Melling Address (optional) Read Code & Telephone Number Final Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Laterment of Affirmation: Millic Dagit Arian Carles and the fair market value (if applicable) is correct and true to the best of my knowledge.	Mailing Address		
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Millic Dagit Name Eldora, IA, 50627 Melting Address (if different from above) Material Address (if different from above) Material Address (if different from above) Material Address (if different from above) ONOR OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Melling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit			
Millie Dagit Name 211 Subspens Ave Millie Dagit Name 212 Subspens Ave Millie Address (if different from above) Making Address (if different from above) Making Address Area Code & Telephone Number (if different from above) CNOR OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name Name 1814 11th Street Eldora, Iowa 50627 Melling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number **Value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00". Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millie Dagit		<u> </u>	
Name City, State, Zp (if different from above) Area Code & Telephone Number (if different from above) ONOR OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name Isl4 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the owner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI	VE.	
### Blook 1.5 Sect Mailing Address (If different from above)			
Melling Address (if different from above) Maggidas area is as		Eldora, IA, 50627	
Email Address Area Code & Telephone Number (if different from above) DONOR OF GIFT, BEQUEST, OR GRANT: Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the order and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Mailing Address (if different from above)	City, State, Zip (if different from abo	ve)
Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the shorr and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.			
Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the short and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Email Address	Area Code & Telephone Number (if	different from above)
Wally & Barb Chrisman Name 1814 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the short and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	ONOR OF GIFT, BEQUEST, OR GRANT:		
Name 1814 11th Street Eldora, Iowa 50627 Meiling Address City, State, Zip Code 641-858-5098 Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. In the provided a description of the gift, bequest, or grant that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the conor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.			
1814 11th Street Eldora, Iowa 50627	-		
Melling Address 641-858-5098 Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the oner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	·		
Area Code & Telephone Number Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the prior and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.		1 8/24/00	\$ 40.00
Area Code & Telephone Number *Value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00", Email Address (optional) Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the prior and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	<u> </u>		
Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the prior and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	* " ** * * * * * * * * * * * * * * * *	Date of Gift, Bequest, or Grant	Amount/Value*
Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. tatement of Affirmation: Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the prior and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Area Code & Leiephone Number		
Provide a description of the gift, bequest, or grant and purpose thereof: Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. tatement of Affirmation: Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the oner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Email Addrage (antional)	receiving department or office. If no	value mark "0,00",
Donation to student phone to use for students. This money was a donation the insisted on making for students cleaning up after storm damage Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. tatement of Affirmation: Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the phore and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Citial Address (Optional)		
Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. **Taternent of Affirmation:** Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Provide a description of the gift, bequest, or grant and purpose thereof:		
Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. **Tatement of Affirmation:** Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the phor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	• • • • • • • • • • • • • • • • • • • •		م المام م
Criteria to use this form: Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. tatement of Affirmation: Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.		money was a donation the insiste	d on making
Receipt of any gift, bequest, or grant that is received by any department of the state or received by the Governor on behalf of the state. Laterment of Affirmation: Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the oner and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	for students cleaning up after storm damage		
tatement of Affirmation: Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the phor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Criteria to use this form:		
tatement of Affirmation: Millic Dagitaffirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Deceins of any offit have set or arent that is received by any decertment	t of the state of received by the Governor on	habalf of the state
Millie Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	versity of any Bull pediason or Broth har preceived by any debolution		pallal of the State.
Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.			
Millic Dagit affirm that the gift, bequest, or grant reported above is accurate. I further affirm that the information concerning the onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.			
	tatement of Affirmation:		
onor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.	Millie Dagit affirm that the gift, bequest, or grant report	ted above is accurate. I further affirm that the	information concerning the
1970 0 1 t			
19-24-09			
19-24-09	•		
	Aprox of	፟\bar{\bar{\bar{\bar{\bar{\bar{\bar{	- 24 - 09

LA ETHICS AND SURE BE Reviesa 06/05

2009 DEWAD ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

Gift, Bequest, or Grant information received by a department or
accepted by the Governor on behalf of the state
For office use only
Indexed
Audited
Checked
Computer

FORM-GBG

State Training School	·	
ame of Department or Office 3211 Edgington Ave. Plok	78. IA. 50627	
lailing Address City	, State, Zip Code	
641-85%-5402 rea Code & Telephone No.		***
INTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE		
Millie Dagit		
ame 3211 56gingree Ave.	Eldom, IA, 50627	
failing Address (if different from above)	City, State, Zip (if different from abo	nve)
redugit@dhs.stmtr.is.us		,••,
mail Address	Area Code & Telephone Number (1	different from above)
NOD OF CIET PECLIFET OF CRANT.	-	
NOR OF GIFT, BEQUEST, OR GRANT:		
Patricia Magnuson		
ame		
405 17th Avenue Eldora, Iowa 50627-2347		
ailing Address City, State, Zip Code	8/25/2009	\$ 100.00
	Date of Gift, Bequest, or Grant	Amount/Value*
rea Code & Talephone Number	, , , , , , , , , , , , , , , , , , , ,	
	*value is defined as "fair market val receiving department or office. If no	ue" of item as determined by value mark "0.00".
mail Address (optional)		THE PROPERTY OF THE PARTY OF TH
Provide a description of the gift, bequest, or grant and purpose thereof:		
Donation for hail cleanup-to be used for students		
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
Criteria to use this form:		
Receipt of any gift, bequest, or grant that is received by any department of	the state or received by the Governor on	behalf of the state.
tement of Affirmation:		
Aillie Dagitaffirm that the gift, bequest, or grant reported	above is accurate. I further affirm that the	information concerning the
or and assessment of the fair market value (If applicable) is correct and the	ue to the best of my knowledge.	_
mail.	9-11-	00



2009 DEC 1974 A TONIOS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12[™], SUITE 1A DES MOINES, IA 50319 Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

	indexed
	Audited
	Checked
•	Computer
	,
from	n above)
	·
lum	ber (if different from above)
	\$ 40.00
	* * *
-ran	
nark:	et value" of Item as determined by . If no value mark "0.00",
IIICE	. II no value mark G.GO .
/6W	or on behalf of the state.
m th	at the information concerning the
•	जर राज्य गार्चर राज्याचर र च्याच्या साम्
_	7 11.50
<u></u>	7-24-09
	Date

DEPARTMENT OF	OFFICE RECEIVING THE GI	FT, BEQUEST, OR GRANT:
---------------	-------------------------	------------------------

State Training School				
lame of Department or Office 3211 Edgington Ava.		ra, IA. 50627		
Mailing Address		City, State, Zip Code		
641-858-5462 Vrea Code & Telephone No.				
	RECIPIENT DEPARTMENT OR OFFICE			
Millie Dagit			a. :	
lame				
3211 Edgington Ave. Asiling Address (if different fr	OM Bhove)	Eldora, IA, \$0627 City, State, Zip (if different from a	have	
mdagit@dha.state.in.us		Oity, Guile, 21p (il dilletent iron) a	pove)	
mail Address		Area Code & Telephone Number	(if different from above)	
ONOR OF GIFT, BEQUES	ST. OR GRANT:			
		· 1		
American Legion Auxili	ary			
720 Lyon Street	Des Moines, Iowa 50309			
Mailing Address	City, State, Zip Code	8/24/09	\$ 40.00	
IRBITION AND COS	City, State, Zip Code		\$ 40.00	
rea Code & Telephone Num	her	Date of Gift, Bequest, or Grant	Amount/Value*	
	~~ ·	value is defined as "fair market y	alue" of item as determined by	
mail Address (optional)		receiving department or office. If	no value mark "0.00".	
Provide a description of the g	gift, bequest, or grant and purpose thereof:			
Donation to christma	s find			
		· · · · · · · · · · · · · · · · · · ·	***	
Criteria to use this form:				
Receipt of any gift, bequest,	or grant that is received by any department of	the state or received by the Governor of	n behalf of the state.	
itement of Affirmation:				
Millie Dagit				
_	affirm that the gift, bequest, or grant reported a ir market value (if applicable) is correct and tru	above is accurate. I further affirm that the to the best of my knowledge.	he information concerning the	
	i maner value (ii applicable) lo correct and tru	e to the best of my knowledge.		
ior and assessment of the fai				
for and assessment of the fail				
nor and assessment or the fail	~ h	D	-24-09	

Revised popo 09

· IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12[™], SUITE 1A DES MOINES, IA 50319 Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filled within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state

Indexed_	or office use only
Computer	
·	

DEPARTMENT OR OFFICE RECEIVING THE GIFT, BEQUEST, OR GRANT:

- C4-4- 7C	'- '		
State Training School			
Name of Department or Office 3211 Edgington Ave.	e of Department or Office Edgington Ave. Eldon, IA, 50627		
ailing Address City, State, Zip Code			
Area Code & Telephone No.			
CONTACT PERSON FOR RECI	PIENT DEPARTMENT OR OFFICE		
Millie Dagit			
Name 3211 Edgingson Ave.		Eldora, 1A, 50627	
Mailing Address (if different from abmdrat@dbs.sme.ja.us	oove)	City, State, Zip (if different from above)	
Email Address		Area Code & Telephone Number (if different from above)	
OONOR OF GIFT, BEQUEST, O	R GRANT:		
Diane Knepp A Stitch Above	the Rest		
Name	- 10-11-11-11-11-11-11-11-11-11-11-11-11-1		
15 South 1st Street	Fort Dodge, Iowa 50501		
Mailing Address	City, State, Zip Code	\$ 100.00	
		Date of Gift, Bequest, or Grant Amount/Value*	
Area Code & Telephone Number		"value is defined as "fair market value" of item as determined by	
		receiving department or office. If no value mark "0.00".	
Carall Address (cardens B			
Email Address (optional)	TOTAL CONTROL OF THE STREET OF		
	quest, or grant and purpose thereof:		
Provide a description of the gift, be	equest, or grant and purpose thereof;		
Provide a description of the gift, be	equest, or grant and purpose thereof:	naterial	
Provide a description of the gift, be		naterial	
Provide a description of the gift, be		naterial	
Provide a description of the gift, be Donation to religious acti Criteria to use this form:	ivites fun, using for musical n	naterial the state or received by the Governor on behalf of the state.	
Provide a description of the gift, be Donation to religious acti Criteria to use this form:	ivites fun, using for musical n		
Provide a description of the gift, be Donation to religious acti Criteria to use this form:	ivites fun, using for musical n		
Provide a description of the gift, be Donation to religious acti Criteria to use this form:	ivites fun, using for musical n		
Provide a description of the gift, be Donation to religious acti Criteria to use this form: Receipt of any gift, bequest, or gra tatement of Affirmation: Millia Dagit	ivites fun, using for musical n	the state or received by the Governor on behalf of the state.	
Provide a description of the gift, be Donation to religious acti Criteria to use this form: Receipt of any gift, bequest, or gradatement of Affirmation: Millie Dagit affirm	ivites fun, using for musical numbers from that is received by any department of	the state or received by the Governor on behalf of the state.	
Provide a description of the gift, be Donation to religious acti Criteria to use this form: Receipt of any gift, bequest, or gradatement of Affirmation: Millie Dagit affirm	ivites fun, using for musical n	the state or received by the Governor on behalf of the state.	
Provide a description of the gift, be Donation to religious acti Criteria to use this form: Receipt of any gift, bequest, or gradatement of Affirmation: Millie Dagit affirm	ivites fun, using for musical numbers from that is received by any department of	the state or received by the Governor on behalf of the state.	
Provide a description of the gift, be Donation to religious acti Criteria to use this form: Receipt of any gift, bequest, or gradatement of Affirmation: Millie Dagit affirm	ivites fun, using for musical numbers from that is received by any department of	the state or received by the Governor on behalf of the state.	

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319

Fax: (515)281-3701 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lows or received by the Governor on behalf of the state be reported to the lows Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

Gift, Bequest, or Grant information received by a department or accepted by the Governor on behalf of the state
For office use only

FORM-GBG

indexed Audited Checked Computer

State Training School			
iame of Department or Office 3211 Edgington Ave.	Ride	m TA 50622	
failing Address	Eldora, I.A., 50627 City, State, Zip Code		
641-858-5402 rea Code & Telephone No.			
	ECIPIENT DEPARTMENT OR OFFICE		
MIAGI FERSON FOR R	ECIPIENT DEPARTMENT OR OFFICE	:	
Millie Dagit			
lame 3211 Edgington Ave.		Eldora, IA, 50627	
Mailing Address (if different fro	m above)	City, State, Zip (If different from a	above)
mdagi@dhs.state.ie.us mail Address		Ama Cada A Talanhara	44 1144
Mildli Address		Area Code & Telephone Number	(if different from above)
ONOR OF GIFT, BEQUES	T, OR GRANT:		
American Legion Aux			
Amencan Legion Aux			
720 Lyon Street	Des Moines, la 50309		
Mailing Address	City, State, Zip Code	11/19/2009	\$ 125,00
Table 19 7 to all 400	ony, orace, up dode		
Area Code & Telephone Numb	er	Date of Gift, Bequest, or Grant	Amount/Value*
515-282-7987	wastale an mate in Paris and Additional of Paris market as in the material waste and the manual and the market		value" of item as determined b
mail Address (optional)		Treceiving department or office.	no value mark "u.uu".
Provide a description of the gi	ft, bequest, or grant and purpose thereof;		
x-mas			
Criteria to use this form:		•	
Receipt of any gift, bequest, o	r grant that is received by any department of	the state or received by the Governor	on behalf of the state.
		·	
etement of Affirmation:			
Millie Dagit			
Millie Dagir	ffirm that the gift, bequest, or grant reported	above is accurate. I further affirm that	the information concerning the
as and anagement of the fair	market value (it applicable) is correct and tru	se to the best of my knowledge.	
nor and assessment of the fair			
nor and assessment of the fair			
nor and assessment of the fair	* 	12/3/200	99
Signatur	icit	12/3/200)9 Date

Revised 06/05

IA ETIOWA FILICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

2009 DEC 30 AM 11: 41

Fax: (515)281-5701 4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts, bequests, and grants given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is required to be filed within 20 days of receipt of the gift, bequest, or grant.

FORM-GBG

.:	For office use only
indexed	FOI Office use only
Audited_	
Checked	
Compute	r
•	

State Training School				
Name of Department or Office 3211 Edgington Ave.				
Mailing Address		Eldom IA. 50627 City, State, Zip Code		
641-858-5402		ny, state, zip code		
Area Code & Telephone No.				
ONTACT PERSON FOR RECI	PIENT DEPARTMENT OR OFFIC	注:		
Millie Dagit				
Name 2211 Edgiagnos Avs.		Tiden 14 COOR		
Mailing Address (if different from a	bave)	Eldom, IA, 50627 City, State, Zip (if different from above)		
mdagii@dhs.smto.ia.us	-5.5,	ony, state, up (it directly from above)		
Email Address		Area Code & Telephone Number (if different from above)		
ONOR OF GIFT, BEQUEST, C)R GRANT:			
James & Betty Key				
Name		P		
409 Oak Avenue	Eldora, Iowa 50627			
Mailing Address	City, State, Zip Code	\$		
		Date of O'd Date o		
Yea Code & Telephone Number		Date of Gift, Bequest, or Grant Amount/Value*		
		"value is defined as "fair market value" of item as determined by		
Email Address (optional)		receiving department or office. If no value mark "0.00".		
Provide a description of the gift, be	equest, or grant and purpose thereof:	<u> </u>		
	· ·			
Donation to religious act	ivites fund for chaplain use.			
Criteria to use this form:				
Receipt of any gift, bequest, or gra	int that is received by any department	of the state or received by the Governor on behalf of the state.		
atement of Affirmation:				
Millie Dagit				
amm	n that the gift, bequest, or grant reporte tket value (if applicable) is correct and	d above is accurate. I further affirm that the information concerning the		
ior and assessment of the fair mar	I was in application to content and	and to the poor of the Wienderfall		
nor and assessment of the fair mar				
nor and assessment of the fair mar				
nor and assessment of the fair mar		12/30/09		

No. 0544 p. P. 107

* * * Communication Result Report (Dec. 29. 2009 11:59AM) * * *

1)

Date/Time: Dec. 29. 2009 11:38AM

File No. Mode	Destination	Pg (s)	Result	Page Not Sent
0541 Memory TX	916415152814073	P. 1	E-2) 2) 2) 2) 2)	P. 1

Reason for error
E. 1) Hang up or line fall
E. 3) No answer
b. 5) Exceeded max. F-mail size

E. 2) Busy E. 4) No facsimile connection

Period Olita			
IOWA ETHICS AND CAMPAIGN DISCLOSU	RE BOARD	FORM-GBG	
610 Bast 12 th , Buite 1A Des Modres, IA 68010	GR, Sequest, or Grant information		
Fact (#10/201-2701		passing by a department or marginal by the Corrector on payed	
www.som.gov/enden	ham an area a	district.	
term Andreas andre a Vermane all alle becomes and annotation and		POCASTICINE DAY	
white of land or received by the Constitut on being of the state by repr	ried to the low Chies	Author	
time Code session 6.7 regulars all gifts, brequests, and genetic given to a siste of loss or recoited by the Caversac on bright of the stabs be reser- ded Extraolid Disclosure blood staff the Caversac Caversac Caversac products a way of the repeats to the Orientaness Caversac Caversac. Red Limits 20 days of recoits of the gift, beginning or practice.	Mee. The Goord will	9-6-4	
Red within 20 days of receipt of the gift, beginning grant	title heat is cadificate at Ma	Canadia	
DEFNATABLIT OR OFFICE RECEIVED THE SUT, OFFICER, OR	BRANTS.		
State Yoursey Metop)			
How of Department on Olymp			
Reserved Committeed on Orbites and Interpolation on Orbites (Robbing Adaption Chip.)	- A	···	
My Cuty F No May 10 Mg.			
CONTACT PROMOTERS INCOMENT CONTACTION OF CONTACT			
Mill Des			
Wild Digital Control of the Control	Property shifts		
Party Tipon Palling Inc. story	cyl, pare " 💯 (paleares de	π -1μν	
Sal Area	Area Cade & Talgghyne Mare	New Al-Additional Street Street	
DOROR OF SIFT, BESIDEST, OR GRANTI			
	ī		
Wal-Man			
The Date of the Control			
949 S. Onk St. Jerus Palle, Josep 60/24	12/19/09	* 100.00	
. 00.000.000			
come Code & Yelephone Number	Drive of Citi, Especial of the	. , , , , ,	
, , , , , , , , , , , , , , , , , , , ,	Yorks in Anthrop of The same	d value of him as determined by	
Ortol Address Instituted and State and Table.			
Provide a discopplica of the gat, to quest, or great our pageous warners			
N- in the first description of the state of			
Calturbs by seas this terror			
Receipt of any gift, because, or grant that to required by any department of the	rational residual system Committee	er en behad et han mete.	
		- ··	
Statement of Affirmation;			
Matemant, of Afformation; Millie Dught when the pth import, organs reported also derive and summerced of the the surfect Value (it applicable) to consect and mile to			

2009 DEC 30 AM 11:58